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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission **7**

Application Number	10/611,763
Filing Date	July 1, 2003
First Named Inventor	William T. Wilkinson
Art Unit	2147
Examiner Name	Glenn E. Richmond
Attorney Docket No.	WIL-115US

ENCLOSURES (Check all that apply)

- ☒ Fee Transmittal Form
 - ☐ Fee Attached
- ☒ Amendment/Reply
 - ☐ After Final
 - ☐ Affidavits/Declaration(s)
- ☒ Extension of Time Request
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement
- ☐ Certified Copy of Priority Document(s)
- ☐ Response to Missing Parts/
Incomplete Application
 - ☐ Response to Missing Parts
under 37 CFR 1.52 or 1.53

- ☐ Drawing(s)
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition to Convert to a
Provisional Application
- ☐ Power of Attorney, Revocation,
Change of Correspondence
Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s) ____
 - ☐ Landscape Table on CD

- ☐ After Allowance Communication
to TC
- ☐ Appeal Communication to Board
of Appeals and Interferences
- ☐ Appeal Communication to TC
(Appeal Notice, Brief, Reply
Brief)
- ☐ Proprietary Information
- ☐ Status Letter
- ☒ Other Enclosure(s) (please
identify below):
Form 2038
Return Postcard

Remarks:

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm Name **RatnerPrestia**
Signature
Printed Name **Rex A. Donnelly**
Date **March 13, 2006**

Registration No. **41,712**

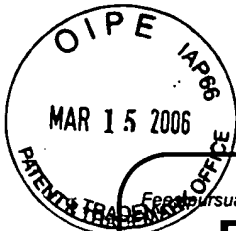
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Signature
Typed or Printed Name **Gayle D. Bay** Date **March 13, 2006**

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Effective on 12/08/04.

Fee pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

**FEE TRANSMITTAL
For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27**Complete if Known**

Application Number	10/611,763
Filing Date	July 1, 2003
First Named Inventor	William T. Wilkinson
Examiner Name	Glenn E. Richmond
Art Unit	2174
Attorney Docket No.	WIL-115US

TOTAL AMOUNT OF PAYMENT (\$) 120.00**METHOD OF PAYMENT** (check all that apply)☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____☒ Deposit Account Deposit Account Number: 18-0350 Deposit Account Name: RatnerPrestia

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

	Small Entity	
	Fee (\$)	Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =		x	=			

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =		x	=

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): One Month Extension of Time**Fees Paid (\$)**120.00

SUBMITTED BY

Complete (if applicable)

Signature	Registration No. Attorney/Agent)	41,712	Telephone	302-778-2500
Name (Print/Type)	Rex A. Donnelly		Date	March 13, 2006

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